

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION                  | INITIALS | ID NO. | DATE    |
|---------------------------|----------|--------|---------|
|                           | WK       |        | 08-20-9 |
| FEE DETERMINATION         |          |        |         |
| O.I.P.E. CLASSIFIER       |          | 18     | 8/21/91 |
| FINALITY REVIEW           | WK       | 625    | 10/1/91 |
| RESPONSE FORMALITY REVIEW |          |        |         |

INDEX OF CLAIMS

Rejected N  
 Allowed I  
 Canceled A  
 Restricted O  
 (Through numeral)

Non-elected  
 Interference  
 Appeal  
 Objected

| Claim | Date |
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet here

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